Secretary of State Limited Partnerships 1700 West Washington 7<sup>th</sup> Fl Phoenix, Arizona 85007



Secretary of State Use:

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Plus \$3.00 per page

SUBMIT IN DUPLICATE with a self-addressed, stamped envelope.

All correspondence regarding this filing will be sent to the principal office.

## STATEMENT OF FOREIGN QUALIFICATION OF A FOREIGN LIMITED LIABILITY PARTNERSHIP ARS \$29-1106

Name of foreign limited liability partner	ership (end with "Limited Liability Parts	nership" or "LLP")		
The state and date of formation	Authorizing agency (optional)	Registration number (optional)		
The Arizona street address of the office	e used by the Limited Liability Partnersh	hip in this state:		
Street address of chief executive office	e in Arizona (PO Box and c/o are not acc	ceptable) City	Zip	
Name of agent for service of process	Phone Number			
Arizona address of agent (PO Box and	c/o are not acceptable) City	Arizona	Zip	
The address of the office to be maintai	ned in the state of organization:			
Address	City	State	Zip	
A delayed effective date, if any:				
Signature of General Partners:				
Signature	Print Name			
Signature	Print N	Print Name		
Delayed effective date if any:				

\*\*\*\*An affidavit evidencing publication shall be filed with the Secretary of State within ninety days after the filing of the statement of qualification. (Filing Fee \$3.00)